

SHEBOYGAN YMCA

812 Broughton Drive, Sheboygan, WI 53081

P 920-451-8000 • F 920-451-8019

www.sheboygancountyyymca.org



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

LIFEGUARD TRAINING DECEMBER 9 - 11, 2022

Age 15 & Older

Lifeguard training and certification at the Y will teach you how to effectively prevent and respond to water emergencies with the American Red Cross lifeguard training. Our course is designed to equip you with the skills and knowledge necessary for emergencies in and around the water. You will learn how quick response times and effective preparation are vital to being a lifeguard while also understanding the crucial elements in helping to prevent drownings and injuries. **Maximum of 10 students.**

Prerequisites

- Must be at least 15 years of age
- Swim 300 yards continuously demonstrating breath control and rhythmic breathing using the front crawl and breast stroke
- Tread water for 2 minutes using only the legs

December 9..... Fri 6:30pm - 7:30pm

(Mandatory Prerequisite Swim Test)

December 10 Sat 8:00am - 4:00pm

December 11 Sun..... 8:00am - 4:00pm



SHEBOYGAN YMCA 2022 FALL LIFEGUARD TRAINING

Please return to the Sheboygan YMCA, 812 Broughton Drive, Sheboygan, WI 53081

Name _____ Birth Date _____ M F

Email _____ Phone 1 _____ Phone 2 _____

Address _____ City _____ State _____ Zip _____

Hold Harmless Agreement

I hereby agree to waive any claim or liability I may have on the YMCA arising out of use of the facility, and further agree that I will indemnify and save harmless the YMCA from any and all claims brought against the YMCA, its members and volunteers, on account of death, injury, or damage to persons or property received by any persons by reason of the acts or omissions of the users in their use. I also agree to waive any claims against the YMCA, its members and volunteers for injuries or damages that may result from the conduct of other persons, including participants in the program. I understand the above responsibilities and I give permission for myself and/or my child to participate and be photographed in YMCA activities.

Participant Signature _____ **Date** _____

Fee

\$150.00 YMCA Member

\$185.00 Participant

**Click on button to email form.
YMCA will contact you for payment.**

Payment

Cash Check # _____

Credit Card # _____ Exp Date _____ 3 Digit Code _____

Email form to: hnitsch@sheboygancountyyymca.org

Receipt # _____ Amount Paid _____ Rec'd By _____ Date _____

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